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FORM D

SEC Mail Processing Section

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

JUL 2 8 2008

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

OMB APPROVAL				
OMB Number:	3235-0076			
Expires: July Estimated average	31.2008			
Estimated average	ge burden			
hours per respon	se 16.00			

SEC USE ONLY					
Prefix	Serial				
DATE R	ECEIVED				
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งของกฤตุเอก, DC บกเรอสก Limited offering exempt	TION
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Stone Creek Apartments Ltd.	
Filing Under (Check box(cs) that apply): Rule 504 Rule 505 X Rule 506 Section 4(6) X Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	08056894
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Stone Creek Apartments Ltd.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 109 N. Post Oak Lane, Suite 400, Houston, TX 77024 (Telephone Number (Including Area Code) 713) 681-5566
Address of Principal Business Operations (Number and St eet, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Acquisition of real estate, development, and operation of m	ultifamily residential
project	
Type of Business Organization corporation	se specify): PROCESSED
Month Year Actual or Estimated Date of Incorporation or Organization: O O O O O O O O O O O O O O O O O O O	THOMSON REUTERS
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or S 77d(6).	ection 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below which it is due, on the date it was mailed by United States registered or certified mail to that address	

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years; • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. • Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Texas 77024 Check Box(es) that Apply:	Director	
Business or Residence Address (Number and Street, City, State, Zip Code) 109 N. Post Oak Lane, Suite 400, Houston, Texas 77024 Check Box(es) that Apply:		
Texas 77024 Check Box(es) that Apply:		
Check Box(es) that Apply:		
Full Name (Last name first, if individual) Burney III, Will 1 m M. Business or Residence Address (Number and Street, City, State, Zip Code) 109 N. Post Oak Lane, Suite 400, Houston, Texas 77024 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual) Lee, Jack G. Business or Residence Address (Number and Street, City, State, Zip Code) 109 N. Post Oak Lane, Suite 400, Houston, Texas 77024 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)	Director	
Burney III, William M. Business or Residence Address (Number and Street, City, State, Zip Code) 109 N. Post Oak Lane, Suite 400, Houston, Texas 77024 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual) Lee, Jack G. Business or Residence Address (Number and Street, City, State, Zip Code) 109 N. Post Oak Lane, Suite 400, Houston, Texas 77024 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual)		General and/or Managing Partner
Business or Residence Address (Number and Street, City, State, Zip Code) 109 N. Post Oak Lane, Suite 400, Houston, Texas 77024 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual) Lee, Jack G. Business or Residence Address (Number and Street, City, State, Zip Code) 109 N. Post Oak Lane, Suite 400, Houston, Texas 77024 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual)		
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Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)	***	
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)		
Business or Residence Address (Number and Street, City, State, Zip Code)	Director	General and/or Managing Partner
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer		
		General and/or Managing Partner
Full Name (Last name first, if individual)	Director	
Business or Residence Address (Number and Street, City, State, Zip Code)	Director	

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Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.							Yes [No X i					
2. What is the minimum investment that will be accepted from any individual?								\$ 50,000					
3. 4.	3. Does the offering permit joint ownership of a single unit?							Yes	No X				
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, Z	ip Code)						
Nar	me of As	sociated Bi	roker or De	aler				···					
Sta	tes in Wi	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)	, , , , , , , , , , , , , , , , , , , ,	****************			****	•••••	□ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Ful	l Name (Last name	first, if ind	ividual)				*·					
Bus	siness or	Residence	: Address ()	Number an	d Street, C	City, State,	Zip Code)	·					
Nar	me of As	sociated Bi	roker or De	aler									
Stat	tes in Wh	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)		***************		,			□ VI	l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (Last name	first, if indi	ividual)									
Business or Residence Address (Number and Street, City, State, Zip Code)													
Nar	ne of Ass	ociated Br	oker or De	aler									•
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)							! States						
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	<u>-0-</u>	\$
	Equity		\$
	Common Preferred		
	Convertible Securities (including warrants)	<u> </u>	\$
	Partnership Interests	3,495,000	\$3,495,000
	Other (Specify)	s	\$
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited Investors	Number Investors 7	Aggregate Dollar Amount of Purchases 3,495,000
	Accredited investors		
	Non-accredited Investors		\$ \$
	Total (for filings under Rule 504 only)		J
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of Security	Dollar Amount Sold
	Type of Offering Rule 505	-	6
			\$
	Regulation A		\$S
	Rule 504		\$ 0.00
	Total		3
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s <u>-0-</u>
	Printing and Engraving Costs		\$
	Legal Fees		s 50,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$ <u>-0-:</u>
	Other Expenses (identify) Texas State Securities Board Filing		\$ <u>500</u>

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. Offering price, numi	BER OF INVESTORS, EXPENSES AND USE OF PI	ROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$ <u>3,444,500</u>
5.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees] \$ <u>-0-</u>	
	Purchase of real estate		₹ \$	\square S 1,400,00
	Purchase, rental or leasing and installation of mac	hinery] \$	s <u></u>
	Construction or leasing of plant buildings and faci	ilities	<u> </u>	\Box \$ 2,044,50
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	ets or securities of another	_so_	
	Repayment of indebtedness	[] s <u> </u>	s <u></u>
	Working capital] \$ <u>-0-</u>	- Ds <u>0-</u>
	Other (specify):]\$ <u>-0-</u>	. [ss
			s <u>0</u>	s
	Column Totals		s 0.00	0.00_2
	Total Payments Listed (column totals added)		_ s <u>_3</u>	,444,500
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The	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to furnished by the issuer to any non-accr	undersigned duly authorized person. If this notice	is filed under Ru sion, upon writte	ale 505, the following
Issu	er (Print or Type)	Signature	O7-18-0	8
	cone Creek Apartments Ltd.	moune		
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
W	lliam M. Burney III	Manager of General Partner	T	

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

